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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln No.: 10/696,284

Confirmation No. 6489

Filed: October 29, 2003

Applicant(s): AKASHE, et al.

Title: METHOD OF PREPARATION OF  
HIGH QUALITY SOY CULTURED  
PRODUCTS

Art Unit: 1761

Examiner: Weir, Anthony J.

Attorney Docket: 77017

Customer No.: 48940

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this date.

Date

Registration No. \_\_\_\_\_  
Attorney for Applicant(s)

**TRANSMITTAL**

United States Patent and Trademark Office  
Customer Service Window, Mail Stop AF  
Randolph Building  
401 Dulany Street  
Alexandria, VA 22314

Sir:

Transmitted herewith is an amendment after final/reply in the above-identified application.

- ☐ An Appendix including amended drawing figures labeled as "Annotated Marked-up Drawings" is enclosed.
- ☒ A Petition for Extension of Time for reply is attached.
- ☒ A Terminal Disclaimer(s) is enclosed together with a fee payment sheet (2).
- ☒ No additional claim fee is required.

Fee Calculation For Claims As Amended

	As Amended	Previously Paid For	Present Extra	Rate	Additional Fee
Independent Claims	1	3	**= 0	x \$ 200.00 =	\$ 0.00
Total Claims	10	20	* = 0	x \$ 50.00 =	\$ 0.00
Fee for Multiple Dependent Claims				\$ 360.00	\$ 0.00
** At least 3			Total Additional Fee		\$ 0.00
* At least 20					

Application No. 10/696,284  
Amendment After Final dated September 29, 2005  
Reply to Office Action of May 31, 2005

☐ Applicant(s) assert entitlement to Small Entity Status  
(37 C.F.R. § 1.27), thus reducing the fee by half to: \$ 0.00

☐ A check in the amount of \$\_\_\_\_\_ is enclosed.

☐ Charge \$\_\_\_\_\_ to Deposit Account No. 06-1135.

☒ The Commissioner is hereby authorized to charge any additional fees which may be required in this application under 37 C.F.R. §§1.16-1.17 during its entire pendency, or credit any overpayment, to Deposit Account No. 06-1135. Should no proper payment be enclosed herewith, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1135. A duplicate copy of this sheet is enclosed.

September 29, 2005

Date

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